

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
FEC MAIL CENTER

2016 AUG 17 AM 8:31
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

BILL BUNCH FOR CONGRESS

ADDRESS (number and street)

PO BOX 901



Check if different than previously reported. (ACC)

TAZEWELL

VA

24651-

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C00603480

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

VA

109

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM

DD

YYYY

in the State of

VA

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

05

21

2016

in the State of

VA

5. Covering Period

05

07

2016

through

07

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

M. Robin McCann

Signature of Treasurer

M Robin McCann

Date

08

11

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

BILL BUNCH FOR CONGRESS

Report Covering the Period:

From:

05 / 07 / 2016

To:

07 / 31 / 2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	580.77	5656.82
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	580.77	5656.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3758.90	5656.82
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3758.90	5656.82
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

BILL BUNCH FOR CONGRESS

Report Covering the Period:

From:

05 07 2016

To:

07 31 2016

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

000

1800.00

(ii) Unitemized.....

580.77

3156.82

(iii) TOTAL of contributions
from individuals ▶

580.77

4956.82

(b) Political Party Committees.....

000

000

(c) Other Political Committees
(such as PACs).....

000

000

(d) The Candidate.....

000

700.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

580.77

5656.82

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

000

000

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

000

00.00

(b) All Other Loans.....

000

000

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

000

000

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

000

000

15. OTHER RECEIPTS
(Dividends, Interest, etc.).....

000

000

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

580.77

5656.82

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

375890

365682

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS

22. TOTAL DISBURSEMENTS
(add Lines 17, 18, 19(c), 20(d), and 21) ►

375890

365682

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

317813

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

58077

25. SUBTOTAL (add Line 23 and Line 24).....

375890

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

375890

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

000

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE		OF	
(check only one)					
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d		
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A.		Date of Receipt	
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City State Zip Code			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
<input type="text"/>		<input type="text"/>	
Name of Employer		Occupation	
Receipt For:		Election Cycle-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify)			

B.		Date of Receipt	
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City State Zip Code			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
<input type="text"/>		<input type="text"/>	
Name of Employer		Occupation	
Receipt For:		Election Cycle-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify)			

C.		Date of Receipt	
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City State Zip Code			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
<input type="text"/>		<input type="text"/>	
Name of Employer		Occupation	
Receipt For:		Election Cycle-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

BILL BUNCH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ninth District Democratic Committee

Mailing Address

City Wytheville State VA Zip Code

Purpose of Disbursement

Campaign Event Expense

Candidate Name

William Bunch

007
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: ☒ Primary ☐ General
☐ Other (specify)

State: VA District: 9

Date of Disbursement

05 / 10 / 2016

Amount of Each Disbursement this Period

1740.00

Full Name (Last, First, Middle Initial)

B. Sam's Mastercard

Mailing Address

City State Zip Code

Purpose of Disbursement

Campaign Event Expense

Candidate Name

William Bunch

007
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: ☒ Primary ☐ General
☐ Other (specify)

State: VA District: 9

Date of Disbursement

05 / 10 / 2016

Amount of Each Disbursement this Period

1050.00

Full Name (Last, First, Middle Initial)

C. Sam's Mastercard

Mailing Address

City State Zip Code

Purpose of Disbursement

Campaign Event Expense

Candidate Name

William Bunch

007
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: ☒ Primary ☐ General
☐ Other (specify)

State: VA District: 9

Date of Disbursement

07 / 12 / 2016

Amount of Each Disbursement this Period

9689.0

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

37589.0

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE OF

FOR LINE NUMBER:
(check only one)

☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LOAN SOURCE Full Name (Last, First, Middle Initial)

Election:

☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

% (apr)

☐

Yes

☐

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C</div>	
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan <div style="border: 1px solid black; height: 20px;"></div>	Interest Rate (APR) <div style="border: 1px solid black; display: inline-block; width: 80px; height: 20px;"></div> %	
Mailing Address	Date Incurred or Established MM / DD / YYYY <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></div>	Date Due MM / DD / YYYY <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></div>	
City	State	Zip Code	
<p>A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred MM / DD / YYYY <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></div></p> <p>B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></div> Total Outstanding Balance: <div style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></div></p> <p>C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)</p> <p>D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____</p> <div style="float: right; width: 30%;"> <p>What is the value of this collateral? <div style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></div></p> <p>Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> </div> <p>E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____</p> <div style="float: right; width: 30%;"> <p>What is the estimated value? <div style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></div></p> </div> <div style="clear: both;"></div> <p>A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).</p> <p style="text-align: right;">Location of account:</p> <p style="text-align: right;">Address:</p> <p style="text-align: right;">City, State, Zip: _____</p> <p style="text-align: right;">Date account established: MM / DD / YYYY <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></div></p>			
<p>F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.</p>			
G. COMMITTEE TREASURER Typed Name Signature		DATE MM / DD / YYYY <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></div>	
H. Attach a signed copy of the loan agreement.			
<p>I. TO BE SIGNED BY THE LENDING INSTITUTION:</p> <p>I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.</p> <p>II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.</p> <p>III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.</p>			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE MM / DD / YYYY <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> / <div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></div>	
Title			

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate
 schedule(s)
 for each
 numbered line)

PAGE OF
 FOR LINE NUMBER:
 (check only one) ☐ 9 ☐ 10

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

20160817 03:00:17

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)		Report Covering Period:			
		From:		To:	
		<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div>		<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div>	
Committee Name				(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A					
B	Column Total Last Page Only.....				
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate
A					
B					
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures
A					
B					
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees
A					
B					
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period
A					
B					
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures		
A					
B					

2016081703000017

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JA 24651

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2016 AUG 17 AM 8:31



Federal Election Commission
999 E Street, NW
Washington, DC 20463

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Federal Election Commission
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The FEC added this page to the end of this filing to indicate how it was received.

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 8/17/16
PREPARER DATE PREPARED

20160817 09:00:17